

Tel: +44 (0) 7930998892 Email: <u>info@obanyachtcharters.com</u>

# **Oban Yacht Charters: Booking Form**

Please note: Your booking is not finalised until we have received this Completed Booking Form and the correct Booking Deposit into our bank account. We will then send a Booking Confirmation to you.

#### **About You:**

Party Leader Full Name:

**Email & Phone Number** 

Date Of Birth:

#### **About Your Charter:**

Do you require a professional Skipper for your trip?

Do you want a Half or Full day of tuition?

Do you want the Premium Package?

Is this a One Way Charter?

Hand Over Location, Date & Time: North Pier Pontoons

Hand Back Location, Date & Time: North Pier Pontoons

### **About Your Crew:**

Please give information regarding your sailing experience and qualifications. You should include the location of your cruises (tidal/non-tidal), durations of your cruises, your position on board, the type and size of the vessel the cruises took place on, and the details of any yachts you have previously chartered.

At least one member of the crew must have a VHF licence. Our insurers require that you hold RYA Coastal Skipper or equivalent levels of experience in Tidal Waters.

As skipper or second in charge (Mate) you should be competent at coastal navigation, weather forecasting & passage planning, handling a vessel in confined spaces, berthing, anchoring, reefing and Man Overboard.

The Mate should be capable of taking charge should something occur to the Skipper.

<u>Please email copies of any qualifications the Skipper and Mate hold when you return this</u> Booking Form.

How did you hear about us?



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# **Skipper**

Tick this box if the details are the same as above.
Full Name:
Address:
Date Of Birth:
VHF licence: (Tick if Yes) Please attach a copy of your certificate.
Next Of Kin Details
Phone Number & Email:
Address:
Sailing Experience & Qualifications
Second in command (Mate)
Full Name:
Email & Phone:
Date Of Birth:
VHF licence (Tick If Yes) Please attach a copy of your certificate.
Next Of Kin Details
Email & Phone:
Address:
Sailing Experience & Qualifications



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Lead Charterer/ Skipper (ii the same)	Signature:	Date:
Skipper (if different)	Signature:	Date:
<u>Witness:</u> Name:	Signature:	Date:
Address:		

## Details of the rest of the Crew:

Please Note: "Crew Details" are not required to be fully completed at the time of booking however, we would ask that they are fully completed and correct one (1) week (7 Days) before the "Hire Period". It is a requirement that any changes to the <u>Crew List</u> are communicated to Oban Yacht Charters as soon as possible during the "Hire Period".

	First Name	Surname	Address
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			



Name:

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Date:

Next Of Kin Details for Crew members (corresponding to numbers above):

	Full Name	Phone Number		Email				
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2								
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<b>Privacy Notice:</b> For further information on our Privacy Policy please see our website. We are GDPR compliant. We are required to collect the information above to fulfil our services to you. We will not use your personal data for any other purpose. We will not share your personal data with anyone outside of the								
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The f	ollowing will be completed by		arters. T	his will then b	pe returned to you as your			
Booki	ing Confirmation.							
Are A	ny Extras Applied?							
Δre a	ny discounts to be applied?							
/ 11 C G	iny diododnito to be applied:							
If Yes	s what Discount/ amount?							
Name and Type of Yacht:								
Trans	saction Type	Amount £ GBP	Due By	/ Date	Recieved?			
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	naining Charter Fee							
	urity Deposit							
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Siane	ed On Behalf of <b>Oban Yacht</b>	Charters						

Signature: